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PTO/SB/01 (6-95)

Approved for use through: 10/31/98 OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Rev. 6/95U.S. Department of Commerce  
Patent and Trademark OfficeAttorney Docket  
Number

H 3172 PCT/US

First Named  
Inventor

HECK, Stephan

COMPLETE IF KNOWN

RECEIVED

Application Number

09/554,631

APR 17 2002

Filing Date

07/28/2000

Group Art Unit

TECH CENTER 1600/2900

Examiner Name

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**UNSATURATED PALM OIL FATTY ALCOHOLS**

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)

11/09/1998

as United States Application Number or PCT International

(if applicable).

Application Number

PCT/EP98/07148

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
197 50 800.6	Germany	11/17/1997	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION

Page 2

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U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
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Firm Name \_\_\_\_\_  Customer Number or label \_\_\_\_\_  
OR \_\_\_\_\_

List Attorney(s) and/or agent(s) name and registration number below:

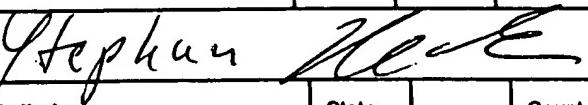
Name	Registration Number	Name	Registration Number
John E. Drach Steven J. Trzaska	32,891 36,296	Aaron R. Ettelman Henry E. Millson, Jr.	42,516 18,980

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:  Customer Number or label 23657 OR  Fill in correspondence address below

Name	John E. Drach		
Address	Cognis Corporation - Patent Department		
Address	2500 Renaissance Boulevard, Suite 200		
City	Gulph Mills	State	PA
Country	USA	Telephone	610-278-4925
		Fax	610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned				
Given Name	Stephan	Middle Initial	Family Name	Heck	Suffix e.g. Jr.	
Inventor's Signature					Date	June 08, 2000
Residence: City	Pulheim	State	Country	Germany	Citizenship	Germany
Post Office Address	Aggerstrasse 12					
Post Office Address						
City	50259 Pulheim	State	Zip	Country	Germany	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto						

Type a plus sign (+) inside this box

H 3172 PCT/US

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Norbert	Middle Initial		Family Name	Klein	Suffix e.g. Jr.	
Inventor's Signature					Date	June 08, 2000	
Residence: City	Mettmann	State		Country	Germany	Citizenship	Germany
Post Office Address	Roemerstrasse 1 h						
Post Office Address							
City	40822 Mettmann	State	Zip	Country	Germany	Applicant Authority	

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Horst-Dieter	Middle Initial		Family Name	Komp	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Langenfeld	State		Country	Germany	Citizenship	Germany
Post Office Address	Kolpingstrasse 33						
Post Office Address							
City	40764 Langenfeld	State	Zip	Country	Germany	Applicant Authority	

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Christiane	Middle Initial		Family Name	Boehr	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Leverkusen	State		Country	Germany	Citizenship	Germany
Post Office Address	Koelner Strasse 30						
Post Office Address							
City	51378 Leverkusen	State	Zip	Country	Germany	Applicant Authority	

Name of Additional Joint Inventor, if any:

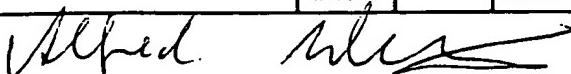
A petition has been filed for this unsigned inventor

Given Name	Norbert	Middle Initial		Family Name	Huebner	Suffix e.g. Jr.	
Inventor's Signature					Date	June 08, 2000	
Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany
Post Office Address	Brockenstrasse 12						
Post Office Address							
City	40597 Duesseldorf	State	Zip	Country	Germany	Applicant Authority	

Additional inventors are being named on supplemental sheet(s) attached hereto

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetName of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Alfred	Middle Initial		Family Name	Westfechtel	Suffix e.g. Jr.	
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Inventor's Signature					Date	June 08, 2000	
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Residence: City	Hilden	State		Country	Germany	Citizenship	Germany
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Post Office Address	Menzelweg 74						
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Post Office Address							
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City	40724 Hilden	State		Zip	Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
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Inventor's Signature					Date			
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Residence: City		State		Country			Citizenship	
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Post Office Address							
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City		State		Zip	Country			Applicant Authority	
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
------------	--	----------------	--	-------------	--	--	--	-----------------	--

Inventor's Signature					Date			
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Residence: City		State		Country			Citizenship	
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Post Office Address							
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Post Office Address							
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City		State		Zip	Country			Applicant Authority	
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Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
------------	--	----------------	--	-------------	--	--	--	-----------------	--

Inventor's Signature					Date			
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Residence: City		State		Country			Citizenship	
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Post Office Address							
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Post Office Address							
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City		State		Zip	Country			Applicant Authority	
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Rev. 6/95U.S. Department of Commerce  
Patent and Trademark Office

# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration Submitted with Initial Filing      OR     Declaration Submitted after Initial Filing

Attorney Docket Number **H 3172 PCT/US**First Named Inventor **HECK, Stephan****COMPLETE IF KNOWN**Application Number **09/554,631**Filing Date **07/28/2000**

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.  
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(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) **11/09/1998** as United States Application Number or PCT InternationalApplication Number **PCT/EP98/07148** and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

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H 3172 PCT/US

## DECLARATION

Page 2

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Firm Name \_\_\_\_\_ Customer Number \_\_\_\_\_  
OR \_\_\_\_\_

List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
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Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:  Customer Number or label 23657  OR  Fill in correspondence address below

Name John E. Drach  
Address Cognis Corporation - Patent Department  
Address 2500 Renaissance Boulevard, Suite 200  
City Gulph Mills  
Country USA Telephone 610-278-4925 State PA ZIP 19406  
Fax 610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned				
Given Name	Stephan	Middle Initial	Family Name	Heck	Suffix e.g. Jr.	
Inventor's Signature					Date	
Residence: City	Pulheim	State	Country	Germany	Citizenship	Germany
Post Office Address	Aggarstrasse 12 Patriziusstr. 12					
Post Office Address						
City	50269 Pulheim	State	Zip	Country	Germany	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto						

Type a plus sign (+) inside this box

H 3172 PCT/US

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Norbert		Middle Initial		Family Name	Klein		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Mettmann		State		Country	Germany	Citizenship	Germany	
Post Office Address	Roemerstrasse 1 h								
Post Office Address									
City	40822 Mettmann	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Horst-Dieter		Middle Initial		Family Name	Komp		Suffix e.g. Jr.	
Inventor's Signature	<i>Horst-Dieter Sgo</i>					Date	Jan 2008		
Residence: City	Langenfeld		State		Country	Germany	Citizenship	Germany	
Post Office Address	Kolpingstrasse 33								
Post Office Address									
City	40764 Langenfeld	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Christiane		Middle Initial		Family Name	Boehr		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Leverkusen		State		Country	Germany	Citizenship	Germany	
Post Office Address	Koelner Strasse 30								
Post Office Address									
City	51379 Leverkusen	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Norbert		Middle Initial		Family Name	Huebner		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Duesseldorf		State		Country	Germany	Citizenship	Germany	
Post Office Address	Brockenstrasse 12								
Post Office Address									
City	40597 Duesseldorf	State		Zip		Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								

Type a plus sign (+) Inside this box

**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Name of Additional Joint Inventor, if any:

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Given Name	Alfred		Middle Initial		Family Name	Westfechtel		Suffix e.g. Jr.		
Inventor's Signature	<i>Alfred Westfechtel</i>					Date				
Residence: City	Hilden		State		Country	Germany	Citizenship	Germany		
Post Office Address	Menzelweg 74									
Post Office Address										
City	40724 Hilden		State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature						Date				
Residence: City			State		Country			Citizenship		
Post Office Address										
Post Office Address										
City			State		Zip		Country			Applicant Authority
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Inventor's Signature						Date				
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Inventor's Signature						Date				
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Post Office Address										
City			State		Zip		Country			Applicant Authority
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Patent and Trademark Office

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First Named Inventor HECK, Stephan

## COMPLETE IF KNOWN

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OR

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in Addressograph" service

## DECLARATION

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Address	Cognis Corporation - Patent Department						
Address	2500 Renaissance Boulevard, Suite 200						
City	Gulph Mills	State	PA	ZIP	19406		
Country	USA	Telephone	610-278-4925	Fax	610-278-6548		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned						
Given Name	Stephan	Middle Initial		Family Name	Heck	Suffix e.g. Jr.		

Inventor's Signature						Date	
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Residence: City	Pulheim	State		Country	Germany	Citizenship	Germany
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Post Office Address	Aggerstrasse 12						
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Post Office Address							
City	50259 Pulheim	State	Zip	Country	Germany	Applicant Authority	

<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto
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Given Name	Norbert		Middle Initial		Family Name	Klein		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Mettmann		State		Country	Germany	Citizenship	Germany	
Post Office Address	Roemerstrasse 1 h								
Post Office Address									
City	40822 Mettmann	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Horst-Dieter		Middle Initial		Family Name	Komp		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Langenfeld		State		Country	Germany	Citizenship	Germany	
Post Office Address	Kolpingstrasse 33								
Post Office Address									
City	40764 Langenfeld	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Christiane		Middle Initial		Family Name	Boehr		Suffix e.g. Jr.	
Inventor's Signature	Christiane Boehr.					Date	June 08, 2000		
Residence: City	Leverkusen		State		Country	Germany	Citizenship	Germany	
Post Office Address	Koelner Strasse 30								
Post Office Address									
City	51378 Leverkusen	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Norbert		Middle Initial		Family Name	Huebner		Suffix e.g. Jr.	
Inventor's Signature						Date			
Residence: City	Duesseldorf		State		Country	Germany	Citizenship	Germany	
Post Office Address	Brockenstrasse 12								
Post Office Address									
City	40597 Duesseldorf	State		Zip		Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								

Type a plus sign (+) inside this box

H 3172 PCT/US

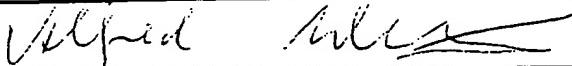
## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Alfred	Middle Initial		Family Name	Westfechtel	Suffix e.g. Jr.	
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Inventor's Signature					Date		
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Residence: City	Hilden	State		Country	Germany	Citizenship	Germany
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Post Office Address: Menzelweg 74

Post Office Address:

City	40724 Hilden	State		Zip	Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
------------	--	----------------	--	-------------	--	--	--	-----------------	--

Inventor's Signature					Date			
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Residence: City		State		Country		Citizenship	
-----------------	--	-------	--	---------	--	-------------	--

Post Office Address:

Post Office Address:

City		State		Zip	Country		Applicant Authority
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Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
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Inventor's Signature					Date			
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Residence: City		State		Country		Citizenship	
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Post Office Address:

Post Office Address:

City		State		Zip	Country		Applicant Authority
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Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
------------	--	----------------	--	-------------	--	--	--	-----------------	--

Inventor's Signature					Date			
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Residence: City		State		Country		Citizenship	
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Post Office Address:

Post Office Address:

City		State		Zip	Country		Applicant Authority
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Additional inventors are being named on supplemental sheet(s) attached hereto